



National Institute of Pharmaceutical Education and Research – Ahmedabad

Palaj, Opp. Air force Station Head Quarters, Gandhinagar – 382355, Gujarat, India

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EMPLOYMENT NOTIFICATION NO.NIPER-A/10/2019-20

The National Institute of Pharmaceutical Education & Research (NIPER) - Ahmedabad is an Institute of National Importance established by an Act of Parliament under the aegis of Department of Pharmaceuticals, Ministry of Chemicals & Fertilizers, Government of India.

Online Application are invited from the eligible and suitable Indian Nationals for direct recruitment for the Non-Faculty posts on regular basis through open competition on all India basis.

The commencement date and last date for submission of applications are as under.

Date of Commencement of Online Application	09/10/2019 (11.00 am)
Last date of Online Application & Payment of Fees	07/11/2019 (up to 6.00 pm)
Last date of receipt of hard copy of online application at NIPER-A along with all enclosures.	22/11/2019 (up to 4.00 pm)

The candidate who have already applied against the Employment Notification No. NIPER-A/09/2019-20 need not apply again as their previous applications will be considered.

DETAILS OF NON-FACULTY POSTS

SN	Name of Post	No. of Post	Category	Pay Level
1	Library and Information Officer	1	UR	Pay Level 10
2	Estate & Security Officer	1	UR	Pay Level 10
3	Medical Officer	1	UR	Pay Level 10
4	Guest House & Hostel supervisor	1	UR	Pay Level 9
5	Administrative Officer	1	UR	Pay Level 8
6	Secretary to Registrar	1	UR	Pay Level 8

1	Name of Post.	Library & Information Officer
2	Age limit for direct recruits	Not exceeding 40 years
3	Educational and other qualifications required for direct recruitment.	Essential Qualification: Graduation in Library Science or Library and Information Science from recognized university/Institute. Experience: 5 (Five) years of experience in Management of Library and office procedure, Data processing and communication skills and Information Services in library under Central/State Government /Autonomous or Statutory organization /PSU/ University or recognized Research or Educational Institute/ other recognised institute of repute Desirable Qualification: Master Degree in library science or Library and Information Science.
4	Period of Probation, if any	2 (Two) years

1	Name of Post.	Estate & Security Officer
2	Age limit for direct recruits	Not exceeding 45 years
3	Educational and other qualifications required for direct recruitment.	Essential Qualification: Bachelor degree in any discipline from a recognized university/institute. Experience: 5 (Five) years of experience in commissioned service in Army/Navy/Air Force/ Para Military Force or Police only not below the rank of captain or equivalent/Dy. SP of police.
4	Period of Probation, if any	2 (Two) years

1	Name of Post.	Medical Officer
2	Age limit for direct recruits	Not exceeding 40 years
3	Educational and other qualifications required for direct recruitment.	Essential Qualification: M.B.B.S Degree in any one of the Schedules to the Indian Medical Council Act, 1956 (102 of 1956) and must be registered in State Medical Register or Indian Medical Register. Desirable Qualification: Post Graduate Medical Qualification recognized by the MCI. Preference will be given to MD in General Medicine.
4	Period of Probation, if any	1 (One) year

1	Name of Post.	Guest House & Hostel Supervisor
2	Age limit for direct recruits	Not exceeding 35 years
3	Educational and other qualifications required for direct recruitment.	Essential Qualification: Bachelor degree from a recognised University/Institute. Experience: 5(Five) years of relevant experience in Central State Govt. Organisations / University Research Institution or Central / State autonomous/ other recognised institute of repute Desirable Qualification: Degree/Diploma in catering/hotel management.
4	Period of Probation, if any	2 (Two) years

1	Name of Post.	Administrative Officer
2	Age limit for direct recruits	Not exceeding 35 years
3	Educational and other qualifications required for direct recruitment.	Essential Qualification: Bachelor's Degree in any discipline from recognised Institute/ University. Experience: 5 (Five) Years of Experience as Assistant Section Officer (ASO) or equivalent in the Level 7 in any Central / State Govt. or University/ PSU or other Central / State Autonomous. Proficiency in noting and drafting. Desirable Qualification: Proficiency in Computer operation.
4	Period of Probation, if any	2 (Two) years

1	Name of Post.	Secretary to Registrar
2	Age limit for direct recruits	Not exceeding 40 years
3	Educational and other qualifications required for direct recruitment.	<p>Essential Qualification: Bachelor's Degree in any discipline from recognised Institute/ University. Proficiency in typing in English with minimum speed of 40 wpm.</p> <p>Experience: 5 (Five) years of experience as Personal Assistant or equivalent in Central State Govt. Organisations / University Research Institution or Central / State autonomous other recognised institute of repute</p> <p>Desirable Qualification: Knowledge of Computer Applications.</p>
4	Period of Probation, if any	2 (Two) years

Relaxation of upper age limit for departmental candidates for all Non-Faculty positions as per Norms for appointment by Direct Recruitment.

● **GENERAL INSTRUCTIONS, ESSENTIAL INFORMATION AND CLARIFICATIONS:**

1.	<p>Only online applications with required uploaded enclosures will be accepted. Applicants should send ONE hard copy print of the application on or before 22/11/2019 till 4:00 p.m. along with all self-attested testimonials, certificates and all supporting documents wherever required or else the application will not be considered. Applicants must produce original testimonials, certificates and other documents at the time of interview, if called.</p> <p>The envelope should be super scribed as <i>Application for the Post of _____</i> Postal Address for sending the Application: I/c Registrar, National Institute of Pharmaceutical Education and Research (NIPER) Ahmedabad Palaj, Opp Air Force Station, Gandhinagar, 382355, Gujarat (India)</p>
2.	Applicants are advised to ensure, before applying, that they possess essential qualification and experience for the post. The Experience and Qualification will be reckoned as on last date for submission of application. No updating of qualification and experience will be entertained after the last date.
3.	The persons applying for more than one post must apply separately for each post (along with payment of fees for each post).
4.	Applicants should submit the applications to the Institute well in advance without waiting for the last date to avoid postal delay or any delay due to other unforeseen events or circumstances. The Institute will not be responsible for any postal delay at any stage.
5.	Incomplete application in any respect will not be considered.
6.	The Institute shall verify the antecedents and documents submitted by applicants at any time, at the time of appointment or during the tenure of service. In case it is found that the Applicants have submitted fake documents or the Applicants have undesirable clandestine antecedents/background and have suppressed the said information, his/her services shall be liable to be terminated.
7.	In case of any inadvertent mistake in the process of selection which may be detected at any stage even after the issuance of appointment letter, the Institute reserves the right to modify/withdraw/cancel any communication made to the Applicants.
8.	The reservations/relaxations policy for SC/ST/OBC/PwBD/EWS Applicants will be provided as per the existing Govt. of India policy.
9.	Reservations for SC, ST, OBC and Persons with Benchmark Disabilities will be as per existing Government of India norms as amended from time to time. Applicants applying for the reserved posts should clearly state to which category they belong.
10.	Applicants seeking reservation under SC/ST category are required to submit certificate on the format prescribed by the Government of India, Department of Personnel & Training (Annexure-I).
11.	Applicants seeking reservation under OBC category are required to submit certificate on the format prescribed by the Government of India, Department of Personnel & Training (Annexure-II).

12.	EWS vacancies are tentative and subject to further directives of GoI and outcome of any litigation. The appointment is provisional and its subject to the Income and Asset certificate being verified through proper channel and if the verification reveals that the claim to belong to EWS is fake/false the services will be terminated forthwith without assigning any further reasons and without prejudice to such further action as may be taken under the provision of the Indian Penal Code for production of fake/false certificate. The Income and Asset Certificate (Annexure-III) issued by any one of the authorities mentioned in the prescribed format as given in Annexure-III shall only be accepted as proof of candidate's claim as belonging to EWS.
13.	Applicants applying for the post(s) reserved for OBC, should submit an self-attested copy of valid caste certificate specifically mentioning Creamy Layer-exclusion in the format prescribed by Govt. of India, issued by competent authority, vide Column 3 of GOI Dept. of Personnel and Training O.M. No. 36012/22/93-Estt.(SCT) dated 8.9.1993 and modified vide DoPT's O.M. No. 36033/3/2004-Estt.(Res) dated 9.3.2004, subsequently revised vide O.M. No.36033/3/2004-Estt.(Res) dated 14.10.2008. The Caste Certificate must be in the format as prescribed by the Govt. of India vide OM No. 36036/2/2013- Estt (Res.) dated 30/05/2014.
14.	The person with Degree of Disability of 40% and above are eligible for applying for the PwBD. Proof to this effect, must be enclosed with the application as per Annexure - IV-I, IV-II, IV-III (which ever applicable) without which the application will be treated as 'General (unreserved)'. The person with Degree of Disability of 40% and above are eligible for applying for the PwBD. Proof to this effect, must be enclosed with the application as per Annexure - IV-I, IV-II, IV-III (which ever applicable) without which the application will be treated as 'General (unreserved)'.
15.	Applicants seeking reservation under SC/ST/OBC/PwBD/EWS category are required to submit certificate in the prescribed format and duly countersigned by the competent authority of Government of India, Department of Personnel and Trainings. Socially and Educationally Backward Class (SEBC) Applicants will be considered as OBC only if they submit the required creamy layer certificates in the above mentioned format. Further, they shall submit the declaration given in the application form.
16.	Applicants already in service must submit a NOC from their employer and forward their applications (hard copy) through proper channel. In case the applicants are in service and delay is expected in getting endorsement of the employer concerned on the original application, the applicants may submit an advance copy of the application along with all enclosures directly (with or without the employer's endorsement on the advance copy). If the original application through proper channel has not been received by the Institute by the last date mentioned in this employment notification, the applicants will have to submit a 'NO OBJECTION CERTIFICATE' along with Vigilance Clearance Certificate in a sealed cover from his/her employer to the Institute at the time of interview. (Annexure VI)
17.	Canvassing in any form on behalf of or by any applicant will disqualify him/her from being considered for post.
18.	All the appointees including the in-service candidates shall be governed by the New Pension Scheme (NPS) introduced by Govt. of India.
19.	The Institute reserves the right to: (a) Withdraw the advertisement either partly or wholly at any time without assigning any reason to this effect. (b) Fill or not to fill up some or all the posts advertised for any reasons whatsoever (c) Increase/decrease the number of posts without giving any reason. (d) Any edition/deletion and changes in matter of terms and conditions given in this notification of recruitment. (e) Hold Written Test, Skill/Trade Test, Presentation and/or Interview for selection, whenever circumstances so warrant;
20.	The number of vacancies indicated in the notification is tentative NIPER Ahmedabad reserves the right to increase or decrease the number of advertised posts at the time of selection. Further, NIPER- Ahmedabad reserves the right to NOT fill any of the posts advertised.
21.	Request for change of mailing address or e-mail address during the process of recruitment will not be entertained under any circumstances. The Institute will not be responsible for any loss of e-mail, loss of any communication due to wrong address provided by the candidates.
22.	Applicants shall have to produce original testimonials at the time of Test / interview, failing which they will not be allowed to appear in Test / interview.
23.	Selection committee reserve the rights to give higher initial pay and position to

	exceptionally qualified and deserving selected applicants.
24.	Applicants have to pay a non-refundable application fees of Rs.1000. Persons from the SC, ST, PWD, Ex-Servicemen categories are not required to pay application fee. Submitting the application form and paying fee should be done only through the online process; please visit Institute's website (www.niperahm.ac.in) for the same. After submission of application and payment of fee, a PDF will be generated of the completed form and fees receipt. Applicants are required to print hardcopy of application form and fee receipt, sign and send the same along with all self-attested relevant supporting documents by post to NIPER-Ahmedabad.
25.	In case of any corrigendum/addendum pertaining to this advertisement, the same shall be published in the Institute's website only. Accordingly, all applicants in their own interests are advised to regularly visit the Institute's website www.niperahm.ac.in . They should also regularly check their email account for updates.
26.	No TA/DA will be paid for attending interview / Test. However, for outstation SC/ST/PwBD candidates' second-class single railway to and fro fare on shortest route will be reimbursed after attending the interview. This is not admissible to SC/ST/PwBD candidates who are already employed in the Central/ State Government services/Autonomous bodies, etc.
27.	Call letters and other correspondence for attending the interview, etc., will be sent only to the eligible candidates by Email only and will be displayed on the Institute website.
28.	After joining the service of the Institute, the persons will have to abide by the Rules, Regulations, Ordinances, Statutes and Act of the Institute applicable from time to time. He/She may be assigned any duty within or outside the Institute depending upon the exigency of the work.
29.	Fake/derecognised Institutions: Candidates, who have obtained degrees or diplomas or certificates for various courses from any Institution declared fake/derecognised by the UGC/AICTE/PCI shall not be eligible for being considered for recruitment to the posts advertised.
30.	Relaxation of upper age limit for Departmental Candidates for all non-Faculty positions as per Norms for appointment by Direct Recruitment.
31.	The Institute shall verify the antecedents or documents submitted by a person at the time of appointment or during the tenure of the service. In case, it is detected that the documents submitted by the Applicants are fake, or the person has a clandestine antecedents or background and has suppressed the said information, then his/her services shall be terminated forthwith.
32.	No interim correspondence whatsoever will be entertained from Applicants regarding conduct and result of test(s) and reasons for not being called for test(s).
33.	In case of any dispute/ambiguity that may occur in the process of selection, the decision of the Director NIPER-Ahmedabad in all matters relating to eligibility, acceptance or rejection of applications, mode of selection, conduct of examination/ interview will be final and no query or correspondence will be entertained in this connection from any individual or his/her agency.
34.	The character of a person for direct recruitment to the service must be such as to render him/her suitable in all respect for appointment to the service. Persons dismissed by the Union Government or by a State Government or by a Local Authority or a Government Corporation owned or controlled by the Central Government or State Government will be deemed to be ineligible for appointment.
35.	No person shall be recruited unless he/she is in good mental and bodily health and free from any physical defect that is likely to interfere with the efficient performance of his official duties. Before candidates recruited directly are finally approved for appointment to the Institute, he/she shall be required to produce a medical certificate of physical fitness from whom the appointing authority specifies.
36.	Errors and omissions in notification and selection process are subject to corrections as per rules and regulations. Moreover, guidelines relating to recruitment rules shall be followed as per NIPER Act, 1998 and as amended from time to time.

FORMAT FOR SC/ST CERTIFICATE

A candidate who claims to belong to one of the Scheduled Caste or the Scheduled Tribes should submit in support of his claim an attested/certified copy of a certificate in the form given below, from the District Officer or the sub-Divisional Officer or any other officer as indicated below of the District in which his parents (or surviving parent) ordinarily reside who has been designated by the State Government concerned as competent to issue such a certificate. If both his parents are dead, the officer signing the certificate should be of the district in which the candidate himself ordinarily resides otherwise than for the purpose of his own education. Wherever photograph is an integral part of the certificate, the Corporation would accept only attested photocopies of such certificates and not any other attested or true copy.

(The format of the certificate to be produced by Scheduled Castes and Scheduled Tribes candidates applying for appointment to posts under Government of India.)

This is to certify that Shri/Shrimati/Kumari* _____ son / daughter of _____ of Village/Town/* _____ in District/Division * _____ of the State/Union Territory* _____ belongs to the Caste/Tribes _____ which is recognized as a Scheduled Castes/Scheduled Tribes* under:

@The Constitution (Scheduled Castes) order, 1950 _____

@The Constitution (Scheduled Tribes) order, 1950 _____

@The Constitution (Scheduled Castes) Union Territories order, 1951 * _____

@The Constitution (Scheduled Tribes) Union Territories Order, 1951* _____

[As amended by the Scheduled Castes and Scheduled Tribes Lists (Modification) order, 1956, the Bombay Reorganization Act, 1960 & the Punjab Reorganization Act, 1966, the State of Himachal Pradesh Act 1970, the North-Eastern Area(Reorganization) Act, 1971 and the Scheduled Castes and Scheduled Tribes Order(Amendment) Act, 1976.]

@The Constitution (Jammu & Kashmir) Scheduled Castes Order, 1956 _____

@The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959 as amended by the Scheduled Castes and Scheduled Tribes Order (Amendment Act), 1976

@The Constitution (Dadra and Nagar Haveli) Scheduled Castes Order 1962

@The Constitution (Dadra and Nagar Haveli) Scheduled Tribes Order 1962

@The Constitution (Pondicherry) Scheduled Castes Order 1964

@The Constitution (Scheduled Tribes) (Uttar Pradesh) Order, 1967

@The Constitution (Goa, Daman & Diu) Scheduled Castes Order, 1968

@The Constitution (Goa, Daman & Diu) Scheduled Tribes Order 1968

@The Constitution (Nagaland) Scheduled Tribes Order, 1970

@The Constitution (Sikkim) Scheduled Castes Order 1978

@The Constitution (Sikkim) Scheduled Tribes Order 1978

@The Constitution (Jammu & Kashmir) Scheduled Tribes Order 1989

@The Constitution (SC) orders (Amendment) Act, 1990

@The Constitution (ST) orders (Amendment) Ordinance 1991

@The Constitution (ST) orders (Second Amendment) Act, 1991

@The Constitution (ST) orders (Amendment) Ordinance 1996

@The Scheduled Caste and Scheduled Tribes Orders (Amendment) Act, 2002

@The Constitution (Scheduled Caste) Orders (Amendment) Act, 2002

@The Constitution (Scheduled Caste and Scheduled Tribes) Orders (Amendment) Act, 2002

% 2. Applicable in the case of Scheduled Castes, Scheduled Tribes persons who have migrated from one State/Union Territory Administration to other.

This certificate is issued on the basis of the Scheduled Castes/ Scheduled Tribes certificate issued to Shri/Shrimati _____ Father/Mother of Shri/Shrimati/Kumari* _____ of village/ town* _____ in District/Division* _____ of the State/Union Territory* _____ who belong to the _____ Caste/Tribe* which is recognized as a Scheduled Caste/Scheduled Tribe in the State/Union Territory* issued by the _____ dated _____.

%3. Shri/Shrimati/Kumari and/or* his/her family ordinarily reside(s) in village/town* _____ of _____ District/Division* _____ of the State/Union Territory of _____.

Signature _____

**Designation _____

With a Seal of Office
State/Union Territory

Place: _____

Date: _____

* Please delete the words which are not applicable @ Please quote specific presidential order % Delete the paragraph which is not applicable.

NOTE: The term ordinarily reside(s) used here will have the same meaning as in section 20 of the Representation of the People Act, 1950.

**** List of authorities empowered to issue Caste/Tribe Certificates:**

- (i) District Magistrate / Additional District Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Dy. Collector/Ist Class Stipendiary Magistrate/Sub-Divisional Magistrate / Extra-Assistant Commissioner / Taluka Magistrate / Executive Magistrate.
- (ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
- (iii) Revenue Officers not below the rank of Tehsildar.
- (iv) Sub-Divisional Officers of the area where the candidate and/or his family normally resides.

NOTE: ST candidates belonging to Tamil Nadu state should submit caste certificate ONLY FROM THE REVENUE DIVISIONAL OFFICER.

**FORMAT OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES
APPLYING FOR APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF INDIA**

This is to certify that _____ son/daughter of _____
of village _____ District/Division _____ In the
_____ State _____ belongs to the
_____ Community which is recognized as a backward class under:

- i) Resolution No. 12011/68/93-BCC dated the 10th September, 1993, published in the Gazette of India Extraordinary – Part I, Section I, No. 186 dated 13th September, 1993.
- ii) Resolution No. 12011/9/94-BCC, dated 19.10.1994 published in Gazette of India extraordinary Part I Section I No. 163, dated 20th October, 1994.
- iii) Resolution No. 12011/7/95-BCC dated the 24th May 1995 Published in the Gazette of India extraordinary Part-I Section I No. 88 dated 25th May, 1995.
- iv) Resolution No.12011/96/94-BCC dated 9th March, 1996.
- v) Resolution No. 12011/44/96-BCC, dated the 6th December, 1996, published in the Gazette of India – Extraordinary-part I, Section-I, No. 210, dated the 11th December, 1996.
- vi) Resolution No.12011/13/97-BCC dated 3rd December, 1997. vii) Resolution No.12011/99/94-BCC dated 11th December, 1997. viii) Resolution No.12011/68/98-BCC dated 27th October, 1999.
- vii) Resolution No.12011/88/98-BCC dated 6th December, 1999, published in the Gazette of India, Extra Ordinary Part-I, Section-I No.270, 6th December, 1999.
- viii) Resolution No.12011/36/99-BCC dated 4th April, 2000, published in the Gazette of India, Extra Ordinary Part-I, Section-I, No.71 dated 4th April, 2000.
- ix) Resolution No.12011/44/99-BCC dated 21.9.2000, published in the Gazette of India, Extra Ordinary Part-I, Section-I, No.210 dated 21.9.2000.
- x) Resolution No.12015/9/2000-BCC dated 6th September, 2001, published in the Gazette of India, Extra Ordinary Part-I, Section-1, No.246 dated 6th September, 2001.
- xi) Resolution No.12011/1/2001-BCC dated 19th June,2003, published in the Gazette of India, Extra Ordinary Part-I, Section-1, No.151 dated 20th June, 2003.
- xii) Resolution No.12011/42002-BCC dated 13th January, 2004, published in the Gazette of India, Extra Ordinary Part-I, Section-1, No.9 dated 13th January, 2004.
- xiii) Resolution No.12011/142004-BCC dated 12th March, 2007, published in the Gazette of India, Extra Ordinary Part-I, Section-1, No.67 dated 12th March, 2007.

Shri _____ and/or his family ordinarily reside(s) in
the _____ District/Division of the _____ State.

This is also to certify that he/she does not belong to the persons/sections (Creamy Layer) mentioned in column 3 of the Schedule to the Government of India, Department of Personnel & Training OM No. 36012/22/93-Estt. (SCT) dated 08.09.1993 and modified vide Govt. of India Dept. of Personnel and Training OM No. 36033/3/2004-Estt(Res) dated 09.03.2004 & 14.10.2008.

Dated:

Seal:

District Magistrate or Deputy Commissioner etc.

Note - I:

- a) The term 'Ordinarily' used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.
- b) The authorities competent to issue Caste Certificate are indicated below:-
 - i) District Magistrate / Additional Magistrate / Collector / Dy. Commissioner / Additional Deputy Commissioner / Deputy Collector / Ist Class Stipendary Magistrate / Sub-Divisional Magistrate / Taluka Magistrate / Executive Magistrate/Extra Assistant Commissioner (not below the rank of 1st Class Stipendiary Magistrate).
 - ii) Chief Presidency Magistrate /Additional Chief Presidency Magistrate/ Presidency Magistrate.
 - iii) Revenue Officer not below the rank of Tehsildar
 - iv) Sub -Divisional Officer of the area where the candidate and/or his family resides.

Note - II:

The closing date for receipt of application will be treated as the date of reckoning for OBC status of the candidate and also, for assuming that the candidate does not fall in the creamy layer.

Government of _____
(Name & Address of the authority issuing the certificate)

INCOME & ASSET CERTIFICATE
TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Certificate No. _____

Date: _____

VALID FOR THE YEAR.....

This is to certify that Shri/Smt./Kumari _____ son/daughter/wife of _____ permanent resident of Village/Street _____ Post Office _____ District _____ in the State/Union Territory _____ Pin Code _____ whose photograph is attested below belongs to Economically Weaker Sections, since the gross annual income* of his/her family** is below ` . 8 lakh (Rupees Eight Lakh only) for the financial year _____ His/her family does not own or possess any of the following assets***:

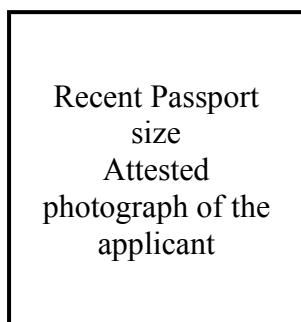
- i) 5 acres of agricultural land and above;
- ii) Residential flat of 1000 sq. ft. and above;
- iii) Residential plot of 100 sq. yards and above in notified municipalities;
- iv) Residential plot of 200 sq. yards and above in. areas other than the notified municipalities.

Shri/Smt./Kumari _____ belongs to the _____ caste which is not recognized as a Scheduled Caste, Scheduled Tribe and Other Backward Classes (Central List).

Signature with seal of Office _____

Name _____

Designation _____



***Note 1:** Income covered all sources i.e. salary, agriculture, business, profession, etc.
****Note 2:** The term 'Family" for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years.
*****Note 3:** The property held by a "Family' in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.

NOTE:-

The Income and Asset Certificate issued 'by any one of the following authorities in the prescribed format as given above shall only be accepted as proof of candidate's claim as 'belonging to EWS:-

- (i) District Magistrate/Additional District Magistrate/ Collector/ Deputy Commissioner/Additional Deputy Commissioner/ 1st Class Stipendiary Magistrate/ Sub-Divisional Magistrate/ Taluka Magistrate/ Executive Magistrate/ Extra Assistant Commissioner,
- (ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/ Presidency Magistrate,
- (iii) Revenue Officer not below the rank of Tehsildar and
- (iv) Sub-Divisional Officer or the area where the candidate and/or his family normally resides.

Form-V
CERTIFICATE OF DISABILITY
(In cases of amputation or complete permanent paralysis of limbs or dwarfism
and in case of blindness)
[See rule 18(1)]
(Name and Address of the Medical Authority issuing the Certificate)

Recent passport
size attested
photograph
(Showing face
only) of the person
with disability.

Certificate No. _____ Date: _____

This is to certify that I have carefully examined Shri/Smt./Kum. _____
son/wife/daughter of Shri _____ Date of Birth (DD/MM/YYYY)
Age _____ years, male/female _____ registration No. _____ permanent
resident of House No. _____ Ward/Village/Street _____ Post Office
_____ District _____ State _____, whose photograph
is affixed above, and am satisfied that:

(A) he/she is a case of:

- Locomotor disability
- Dwarfism
- Blindness

(Please tick as applicable)

(B) the diagnosis in his/her case is _____.

(A) he/she has _____% (in figure) _____ percent (in words) permanent
locomotor disability/dwarfism/blindness in relation to his/her _____ (part of body) as
per guidelines (_____ number and date of issue of the guidelines to be specified).

2. The applicant has submitted the following document as proof of residence:-

Nature of Document	Date of Issue	Details of authority issuing certificate

(Signature and Seal of Authorized Signatory of
Notified Medical Authority)

Signature/thumb
impression of the
person in whose
favour certificate
of disability is

**Form-VI
CERTIFICATE OF DISABILITY
(In cases of multiple disabilities)**

[See rule 18(1)]

(Name and Address of the Medical Authority issuing the Certificate)

Recent passport
size attested
photograph
(Showing face
only) of the person
with disability.

Certificate No. _____ Date: _____

This is to certify that we have carefully examined Shri/Smt./Kum. _____
son/wife/daughter of Shri _____ Date of Birth (DD/MM/YYYY)
Age _____ years, male/female _____ registration No. _____ permanent
resident of House No. _____ Ward/Village/Street _____ Post Office
_____ District _____ State _____, whose photograph
is affixed above, and am satisfied that:

- (A) he/she is a case of Multiple Disability. His/her extent of permanent physical impairment/disability has been evaluated as per guidelines (.....number and date of issue of the guidelines to be specified) for the disabilities ticked below, and is shown against the relevant disability in the table below:

Sl. No.	Disability	Affected part of body	Diagnosis	Permanent physical impairment/mental disability (in %)
1	Locomotor disability	@		
2	Muscular Dystrophy			
3	Leprosy cured			
4	Dwarfism			
5	Cerebral Palsy			
6	Acid attack Victim			
7	Low vision	#		
8	Blindness	#		
9	Deaf	£		
10	Hard of Hearing	£		
11	Speech and Language disability			
12	Intellectual Disability			
13	Specific Learning Disability			
14	Autism Spectrum Disorder			

15	Mental illness			
16	Chronic Neurological Conditions			
17	Multiple sclerosis			
18	Parkinson's disease			
19	Haemophilia			
20	Thalassemia			
21	Sickle Cell disease			

(B) In the light of the above, his/her over all permanent physical impairment as per guidelines (_____ number and date of issue of the guidelines to be specified), is as follows: -

In figures: - _____ percent.

In words: - _____ percent.

2. This condition is progressive/non-progressive/likely to improve/not likely to improve.

3. Reassessment of disability is:

- i) not necessary, or
- ii) is recommended/after _____ years _____ months, and therefore this certificate shall be valid till DD/MM/YYYY.

@ e.g. Left/right/both arms/legs

e.g. Single eye

£ e.g. Left/Right/both ears

4. The applicant has submitted the following document as proof of residence:-

Nature of Document	Date of Issue	Details of authority issuing certificate

5. Signature and seal of the Medical Authority.

Name and Seal of Member	Name and Seal of Member	Name and Seal of the Chairperson

Signature/thumb impression of the person in whose favour certificate of disability is issued
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Form-VII
CERTIFICATE OF DISABILITY
(In cases other than those mentioned in Forms V and VI)
[See rule 18(1)]
(Name and Address of the Medical Authority issuing the Certificate)

Recent passport
size attested
photograph
(Showing face
only) of the person
with disability.

Certificate No. _____ Date: _____

This is to certify that I have carefully examined Shri/Smt./Kum. _____
son/wife/daughter of Shri _____ Date of Birth (DD/MM/YYYY)
Age _____ years, male/female _____ registration No. _____ permanent
resident of House No. _____ Ward/Village/Street _____ Post Office
_____ District _____ State _____, whose photograph
is affixed above, and am satisfied that he/she is a case of _____
disability. His/her extent of percentage physical impairment/disability has been evaluated as per
guidelines (.....number and date of issue of the guidelines to be specified) and is shown against the
relevant disability in the table below:-

Sl. No.	Disability	Affected part of body	Diagnosis	Permanent physical impairment/mental disability (in %)
1	Locomotor disability	@		
2	Muscular Dystrophy			
3	Leprosy cured			
4	Cerebral Palsy			
5	Acid attack Victim			
6	Low vision	#		
7	Deaf	€		
8	Hard of Hearing	€		
9	Speech and Language disability			
10	Intellectual Disability			
11	Specific Learning Disability			
12	Autism Spectrum Disorder			
13	Mental illness			
14	Chronic Neurological Conditions			

15	Multiple sclerosis			
16	Parkinson's disease			
17	Haemophilia			
18	Thalassemia			
19	Sickle Cell disease			

(Please strike out the disabilities which are not applicable)

2. The above condition is progressive/non-progressive/likely to improve/not likely to improve.

3. Reassessment of disability is:

- i) not necessary, or
- ii) is recommended/after _____ years _____ months, and therefore this certificate shall be valid till DD/MM/YYYY.

@ eg. Left/Right/both arms/legs

eg. Single eye/both eyes

€ eg. Left/Right/both ears

4. The applicant has submitted the following document as proof of residence:-

Nature of Document	Date of Issue	Details of authority issuing certificate

5. Signature and seal of the Medical Authority.

Name and Seal of Member	Name and Seal of Member	Name and Seal of the Chairperson

(Authorized Signatory of Notified Medical Authority)
(Name & Seal)

Countersigned

{Countersignature and seal of the
Chief Medical Officer/Medical Superintendent/
Head of Government Hospital, in case the
Certificate is issued by a medical authority who
is not a Government servant (with seal)}

Signature/thumb impression of the person in whose favour certificate of disability is issued
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Note: - In case this certificate is issued by a medical authority who is not a Government servant, it shall be valid only if countersigned by the Chief Medical Officer of the District.

FORM OF CERTIFICATE FOR SERVING DEFENCE PERSONNEL

I hereby certify that, according to the information available with me (No.) _____
(Rank) _____ (Name) _____ is due to complete the
specified term of his engagement with the Armed Forces on the (Date)_____.

Place:
Officer)

(Signature of Commanding

Date:

Office Seal:_____

Certificate to be furnished by the employer/Head of Office/forwarding authority, if in service and applying through Proper Channel.

Employer's Certificate/ Recommendation

Shri/Smt./Dr. _____ is a **Permanent/Temporary/Contractual** employee of the organization holding the post _____ which carries the pay scale of ₹ _____ (Grade Pay) _____ and his/her application is forwarded for consideration and necessary action.

Certified that the particulars furnished by _____ are correct and he/she possesses educational qualifications and experience mentioned in the advertisement.

Further certified that:

- (i) No objection certificate, from present employer.
- (ii) There is no vigilance case pending/contemplated against him/her.
- (iii) His/her integrity is beyond doubt.
- (iv) No major/minor penalties have been imposed on him/her during the last 10 years.
Please enclose list of major/minor penalties imposed during the last 10 years, if any.
- (v) A cadre clearance certificate is appended herewith.

Please mark (√) for which certificates are enclosed

Signature: _____
Name of the Officer: _____
Designation: _____
Department: _____
Office Seal: _____

Place: _____

Date: _____

(Signature of candidate)